

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Kathrin Berkner

Application No.: 09/467,544

Filed: December 10, 1999

For: MULTISCALE SHARPENING AND SMOOTHING WITH  
WAVELETS



Assistant Commissioner for Patents  
Box Missing Parts  
Washington, D.C. 20231

RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION  
(FILING DATE GRANTED)

Sir:

In response to the Notice to File Missing parts of Application (Filing Date Granted) mailed February 7, 2000, please find enclosed:


- (1) a duly executed Declaration and Power of Attorney with respect to the above-referenced patent application;
- (2) a check in the amount of \$130.00 in payment of the surcharge of 37 C.F.R. § 1.16(e);
- (3) a copy of the Notice to File Missing Parts of Application;
- (4) a Petition for a \_\_\_ month extension of time under 37 C.F.R. § 1.136(a); and
- (5) a check in the amount of \_\_\_\_\_ in payment of the extension of time fee.

If any additional fee is required, please charge Deposit Account No. 02-2666.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Dated: 3/27/00

  
\_\_\_\_\_  
Michael J. Mallie  
Reg. No. 36,591

12400 Wilshire Blvd.  
Seventh Floor  
Los Angeles, CA 90025-1026  
(408) 720-8598

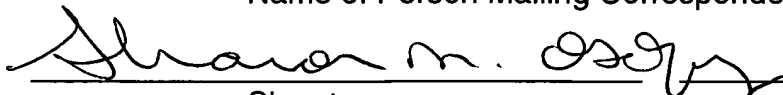
**FIRST CLASS CERTIFICATE OF MAILING**

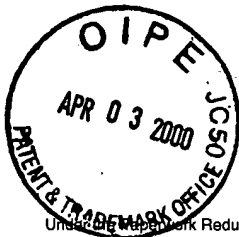
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on 3-28-00  
\_\_\_\_\_  
Date of Deposit

Sharon M. Osofsky

Name of Person Mailing Correspondence

 3-28-00  
Signature Date



PTO/SB/17(6/99)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL FOR FY 2000****TOTAL AMOUNT OF PAYMENT (\$)** 130.00**Complete if Known:**Application No. 09/467,544Filing Date 12/10/99First Named Inventor Kathrin BerknerGroup Art Unit 2721Examiner Name Not Yet AssignedAttorney Docket No. 74451.P103**METHOD OF PAYMENT (check one)**

1. ☒ [ X ] The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

- ☐ [ X ] Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2. ☒  X  Payment Enclosed:

☒  X  Check☐ Money Order☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Code</u>	<u>Fee (\$)</u>	<u>Code</u>	<u>Fee (\$)</u>		
101	690	201	345	Utility application filing fee	<u>          </u>
106	310	206	155	Design application filing fee	<u>          </u>
107	480	207	240	Plant filing fee	<u>          </u>
108	690	208	345	Reissue filing fee	<u>          </u>
114	150	214	75	Provisional application filing fee	<u>          </u>
SUBTOTAL (1) \$					<u>0</u>

**2. EXTRA CLAIM FEES**

		<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims	<u>          </u>	- 20** = <u>          </u>	X <u>          </u>	= <u>          </u>
Independent Claims	<u>          </u>	- 3** = <u>          </u>	X <u>          </u>	= <u>          </u>
Multiple Dependent	<u>          </u>		<u>          </u>	= <u>          </u>

**\*\*Or number previously paid, if greater; For Reissues, see below.**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>
<u>Code</u>	<u>Fee (\$)</u>	<u>Code</u>	<u>Fee (\$)</u>	
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim, if not paid
109	78	209	39	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 0

01/10/2000

- 1 -

PTO/SB/17 (6/99)

Patent fees are subject to annual revisions. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid.

See Forms PTO/SB/09-12



# FIRST CLASS CERTIFICATE OF MAILING

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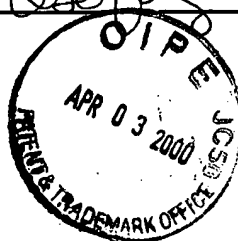
on

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Date of Deposit

Sharon M. Osofsky  
Name of Person Mailing Correspondence

Sharon M. Osofsky  
Signature

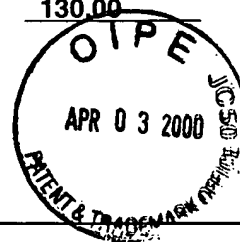
3-28-00  
Date



Serial/Patent No.: 09/465,544	Filing/Issue Date: 12/10/99
Client: Ricoh	
Title: MULTISCALE SHARPENING AND SMOOTHING WITH WAVELETS	
BSTZ File No.: 74451.P103	Atty/Secty Initials: MJM/smo
Date Mailed: 3-28-00	Docket Due Date: 4/7/00
The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:	
<input type="checkbox"/> Amendment/Response (____ pgs.)	<input type="checkbox"/> Express Mail No. <b>XX</b> Check No. 34477
<input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate)	<input type="checkbox"/> Month(s) Extension of Time Amt: \$130.00
<input type="checkbox"/> Application - Utility (____ pgs., with cover and abstract)	<input type="checkbox"/> Information Disclosure Statement & PTO 1449 (____ pgs.) <input type="checkbox"/> Check No. _____
<input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.)	<input type="checkbox"/> Issue Fee Transmittal Amt: _____
<input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.)	<input type="checkbox"/> Petition for Extension of Time
<input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.)	<input type="checkbox"/> Petition for _____
<input type="checkbox"/> Application - Design (____ pgs.)	<input checked="" type="checkbox"/> Postcard
<input type="checkbox"/> Application - PCT (____ pgs.)	<input type="checkbox"/> Power of Attorney (____ pgs.)
<input type="checkbox"/> Application - Provisional (____ pgs.)	<input type="checkbox"/> Preliminary Amendment (____ pgs.)
<input type="checkbox"/> Assignment and Cover Sheet	<input type="checkbox"/> Reply Brief (____ pgs.)
<input checked="" type="checkbox"/> Certificate of Mailing	<input checked="" type="checkbox"/> Response to Notice of Missing Parts
<input checked="" type="checkbox"/> Declaration & POA (4 pgs.)	<input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business
<input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventions Signed Later (____ pgs.)	<input type="checkbox"/> Transmittal Letter, in duplicate
<input type="checkbox"/> Drawings: _____ # of sheets includes _____ figures	<input checked="" type="checkbox"/> Fee Transmittal, in duplicate
<input checked="" type="checkbox"/> Other: PTO Form 1533	

**FEE TRANSMITTAL FOR FY 2000**

TOTAL AMOUNT OF PAYMENT (\$)

130.00**Complete if Known:**Application No. 09/467,544Filing Date 12/10/99First Named Inventor Kathrin BerknerGroup Art Unit 2721Examiner Name Not Yet AssignedAttorney Docket No. 74451.P103**METHOD OF PAYMENT (check one)**

1. ☒ [ X ] The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

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SUBTOTAL (1) \$					<u>0</u>

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		<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
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Independent Claims	<u>          </u>	- 3** = <u>          </u>	X <u>          </u>	= <u>          </u>
Multiple Dependent	<u>          </u>		<u>          </u>	= <u>          </u>

\*\*Or number previously paid, if greater; For Reissues, see below.

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01/10/2000

- 1 -

PTO/SB/17 (6/99)

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See Forms PTO/SB/09-12

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
105	130	205	65	Surcharge - late filing fee or oath	130.00
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for response within first month	
116	380	216	190	Extension for response within second month	
117	870	217	435	Extension for response within third month	
118	1,360	218	680	Extension for response within fourth month	
128	1,850	228	925	Extension for response within fifth month	
119	300	219	150	Notice of Appeal	
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive unavoidably abandoned application	
141	1,210	241	605	Petition to revive unintentionally abandoned application	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	244	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	690	246	345	For filing a submission after final rejection (see 37 CFR 1.129(a))	
149	690	249	345	For each additional invention to be examined (see 37 CFR 1.129(a))	

Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

SUBTOTAL (3) \$ 130.00

\*Reduced by Basic Filing Fee Paid

**SUBMITTED BY:**

Typed or Printed Name: Michael J. Mallie

Signature \_\_\_\_\_

Date

3/27/00

Reg. Number 36,591

Deposit Account User ID

02-2666

(complete if applicable)

# FIRST CLASS CERTIFICATE OF MAILING

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on

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Date of Deposit

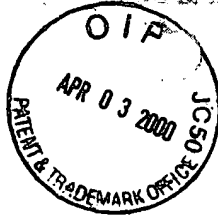
Sharon M. Osofsky  
Name of Person Mailing Correspondence

Sharon M. Osofsky  
Signature

3-28-00  
Date



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<input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.)	<input type="checkbox"/> Notice of Appeal
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<input checked="" type="checkbox"/> Declaration & POA (4 pgs.)	<input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business
<input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventor's Signed Letter (____ pgs.)	<input type="checkbox"/> Transmittal Letter, in duplicate
<input type="checkbox"/> Drawings: _____ # of sheets includes _____ figures	<input checked="" type="checkbox"/> Fee Transmittal, in duplicate
<input checked="" type="checkbox"/> Other: PTO Form 1533	



UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office  
Address: COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
09/467,544	12/10/99	BERKNER	K 74451.P103

021270207  
MICHAEL J MALLIE  
BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP  
12400 WISHIRE BOULEVARD 7TH FLR  
LOS ANGELES CA 90025

2721  
DATE MAILED:

02/07/00

**NOTICE TO FILE MISSING PARTS OF APPLICATION**  
**Filing Date Granted**

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of ☐ \$65.00 for a small entity in compliance with 37 CFR 1.27, or ☒ \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a ☐ small entity (statement filed) ☒ non-small entity is \$ 130.

- ☐ 1. The statutory basic filing fee is:  
☐ missing.  
☐ insufficient.

Applicant must submit \$ \_\_\_\_\_ to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

- ☐ 2. The following additional claims fees are due:

\$ \_\_\_\_\_ for \_\_\_\_\_ total claims over 20.

\$ \_\_\_\_\_ for \_\_\_\_\_ independent claims over 3.

\$ \_\_\_\_\_ for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

- ☒ 3. The oath or declaration:

☒ is missing or unsigned.

☐ does not cover the newly submitted items.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

- ☐ 4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

- ☐ 5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

- ☐ 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

- ☐ 7. Your filing receipt was mailed in error because your check was returned without payment.

- ☐ 8. The application was filed in a language other than English.

Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).

- ☐ 9. OTHER:

Direct the reply and any questions about this notice to "Attention: Box-Missing Parts."

A copy of this notice **MUST** be returned with the reply.

Customer Service Center  
Initial Patent Examination Division (703) 308-1202

01/03/2000 KIMMIE 00000017 09:37:44

01 FC:103

130.00

U.S. GPO 1999 450-5875